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ABSTRACT

This paper highlights six issues to be faced by practitioners and others working in early intervention programs as they strive to meet parental expectations and achieve increased scientific respect and public acceptance. Issues discussed include the need to: (1) find an acceptable auspice and a nomenclature that communicates to everyone that "educare" is the service provided; (2) improve quality without fostering sterility and stifling innovation; (3) establish more effective linkages with other human service fields; (4) increase the broadness of the research agenda; (5) be sensitive to the policy implications of the work; and (6) learn from other countries. It is concluded that the field is a fertile one for the involvement of professional psychologists. (Author/RH)

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EARLY INTERVENTION AT HOME AND ABROAD

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Abstract

This paper highlights six issues that face the field of early intervention as it strives to meet parental expectations and achieve greater scientific respect and public acceptance: (1) the need to find an acceptable auspice and more acceptable nomenclature that communicates to everyone that **educare** is the service provided; (2) the need to improve quality without fostering sterility and stifling innovation; (3) the need to establish more effective linkages with other human service fields; (4) the need to establish a broader research agenda; (5) the need for sensitivity to the policy implications of the work; and (6) the need to learn from other countries. The field is a fertile one for the involvement of professional psychologists.

EARLY INTERVENTION AT HOME AND ABROAD¹

Bettye M. Caldwell

Early intervention, and the educational reform movement of which the renaissance in the field is a part, are now very much a part of the mainstream of activity in all the human service fields. Fortunately, the field of psychology is very much involved. This is obvious from even a casual perusal of journals or from attendance at professional meetings.

Psychology is not the only professional field that has discovered early intervention with its prince and pauper children--preschool education and day care. (The initiate will note that those assignments as to which is prince and which pauper are not accidental.) Early childhood has been discovered, and finally accepted as a legitimate area for intellectual effort, by the field of education itself, by pediatrics, by psychiatry, and by other medical specialties. The field has been discovered by politicians, by journalists who love to describe its weaknesses in sensationalistic style, and by church leaders who recognize its potential for either detriment or contribution to faith development. And it has been discovered by the big business world! The recommendation made by the Committee on Economic Development (1987) that more and better early childhood programs were needed to buttress economic growth in America (by enabling students to have more successful learning careers) has perhaps done as much as anything to accord legitimacy and status to the field.

But the group that has perhaps done the most to achieve intellectual and social legitimacy for the field of early childhood is one that is very much in the spotlight on its own these days--namely, parents. They have discovered the field because they need it and, quite literally, cannot get along without it. Because of the endorsement by parents, early intervention programs need no longer fear rejection and ridicule. That endorsement is based on a need for supplementary help in the rearing of their children, as witnessed by the following population statistics (Taeuber and Valdisera, 1986):

. . . Over half of married women with children younger than six were working outside the home in 1985, in contrast to one-eighth in 1950.

. . . More than eight million mothers with children under six were in the work force.

. . . Over half of the mothers of toddlers were in the work force in 1985, and 48% of mothers of children under one year were working.

. . . One out of five families with children is headed by a woman without a husband/partner.

These demographic trends alone, unbuttressed by data on the effectiveness of early intervention, are sufficiently powerful to warrant the prediction that early childhood programs will expand rapidly in the future. But add to them data from long-term follow-ups such as those by Lazar and Darlington (1982) and by Berreuta-Clement, Schweinhart, Barnett, Epstein, & Weikart (1984) and you have even greater confidence that the prediction

of dramatic program expansion is accurate. One could suggest that these twin "D's"--demographics and data--guarantee that the expansion of early intervention programs will be both externally and internally driven. It is when this fortunate combination of social need and knowledge base occurs that the expansion of service is most likely.

Insuring Healthy Future Growth

The big challenge for the years ahead lies in making certain that this inevitable growth is controlled and progressive rather than chaotic and malignant. At this juncture, several issues that must be dealt with can be identified.

1. Finding a home for early intervention programs. The time has come for the broad, transdisciplinary field of early child development to find and claim for itself a home. That could be translated into professional jargon as saying that we need an acceptable professional auspice. If an area of professional endeavor can be thought of in personal terms, we could say that the field of early intervention has a poor self-concept, even, perhaps, an identity crisis. Many labels are used to describe it--early childhood education, day care, child care, Head Start, preschool, nursery school, day nursery, play school, play center, kindergarten, child development center, and on and on. Sometimes these different terms are used interchangeably, but more often an attempt will be made to differentiate among them on very superficial bases.

The multiplicity of terms distills down essentially to a dual concept--day care (or child care) and early childhood education (or preschool education or nursery school). As is well known,

theoretically equal dual systems are seldom equal, and such is the case with this division. Rather the duality seems to represent a number of polarities with the end points assigned quite different values by society. Until very recently, day care was considered a service for the poor; early childhood education for the middle class. Day care served a pathological clientele (including those terrible creatures, working mothers), whereas early childhood education was for the children of conscientious and caring mothers. The goal of day care was to provide care and protection for the children, while the aim of early childhood education was to expose children to growth-fostering experiences which would enhance their educability. Day care has often been described as custodial or institutional; early childhood education, by definition, as educational and developmental. Day care has been accused of being family weakening, whereas early childhood education has been seen as a vital family support service. Historically, day care emerged as a social service, early childhood education as a branch (albeit only barely legitimate) of education. Obviously these are all false dichotomies, but they seem to be deeply ingrained in the public consciousness.

In the future, it is essential to recognize that there is only one field. Quality day care, and quality early childhood education, represent one integrated service. One does not define a service program exclusively by the number of hours it operates; a hospital is a hospital regardless of whether a patient gets a hand stitched in the emergency room or is an in-patient for six

weeks with major surgery.

I have adopted and begun to encourage the use of the term *educare*--blended, integrated, and amalgamated education and care--as a label for the field. Many people consider the neologism a good one, recognizing that one cannot educate little children without also protecting them, and that one cannot adequately care for and protect them without offering a relevant education.

One unfortunate consequence of this vacillation about what the field is and where it belongs in the scheme of human services is that available programs now operate under a confused jumble of regulations and patchwork funding. Another is that the general public is totally confused. If professionals in the field cannot be clear and unambiguous about the type of service they offer, its clients should not be expected to have accurate perceptions and expectations of just what it is they are purchasing.

Even though I advocate this new label with its slightly different semantic meaning and urge avoidance of the excessively long and connotatively misleading term "early childhood education," I nonetheless consider professional education to be the best auspice for the field. Wider use of the term "*educare*" will gradually increase recognition of the necessity to include health maintenance and social services as essential components of the program. Actually, such services should always be part of a quality educational program, regardless of the ages of children being served.

A preference for education as the correct auspice for the field is not universally shared by advocates and policy makers in

the field. Many people fear the educational bureaucracy more than they admire it (see Zigler, & Ennis 1989). And there are still many child and family advocates who regard the health care system as the most appropriate auspice for early intervention programs, especially those targeted to children younger than three. What remains to be demonstrated perhaps is which auspice is the most efficient and the most preferred by the children's parents.

This plea for consistent auspices and nomenclature for early childhood programs does not imply support for the creation of a monolithic administrative structure which tolerates no variation. However, a societal consensus about the most appropriate form of generic regulation and sponsorship could facilitate significant progress toward the creation of a comprehensive system of early childhood programs.

2. Achieving quality while allowing diversity. "Quality" is a shibboleth in every field--something that is easy to endorse but difficult to define. In educational (or educaring) programs for older children, we can fall back on test scores and pretend that what we mean by quality is whatever is associated with higher test scores! In the early years, however, this is difficult to do, as tests are neither as abundant nor as good.

Recently the National Association for the Education of Young Children undertook to tackle this issue of defining quality and developed an epochal accreditation system now obtained through the National Academy of Early Childhood Programs (see Bredekamp and Apple, 1986). This system allows staff members in active

centers to go through a process of self-study (Bundy, 1988), with reports later validated by on-site observers and sent to a central coordinating body which either awards a credential or, more typically, defers this until the program is strengthened in certain critical components. If necessary, technical assistance is provided centers to help them meet the criteria in terms of which quality is defined.

The field of early childhood has never had any such accreditation system, and this is a monumental step forward which will allow quality to be monitored from within the profession. Until the development of this system, licensing laws, which vary widely from state to state, provided the only operational definition of quality available. Standards in many states represented a "basement" orientation, merely defining a level below which the state could not go. This new system offers hope of a penthouse approach!

There is at least one precaution which must be observed when a procedure for defining quality is put in place: it must not be so restrictive as to curtail creativity and innovation. To some extent, innovation is incompatible with tight definitions of quality. In spite of the philosophic commitment in all scientific fields to continuous advancement of the knowledge base, innovation is often resisted. Just reflect on the flood of defensive papers that appear in the literature whenever any new challenge appears to one or another of the basic tenets of the field. The field of early childhood is no exception; it tends to resist new types of programs and new approaches to familiar activities. I personally experienced the first type of

resistance when we established an infant intervention program at a time when this was not an acceptable type of service (Caldwell & Richmond, 1964). Resistance to curricular innovations is generally just as vigorous. Over the years a curriculum offering a great deal of free play, minimal teacher intervention, and heavy stress on social and emotional growth came to be known as the "traditional" early childhood curriculum. Approaches that deviated significantly from that (such as Bereiter & Engelman, 1966) have often been denounced with a ferocity ill-suited to a field that prides itself on openness.

An essential step for achieving quality is to identify criteria by which it can be recognized. However, in order to avoid curtailing innovation, it is crucial that "criteria" not be allowed to become restrictive "standards." If this happens, any deviation from that which is consensually regarded as appropriate will automatically be condemned. This precaution is expressed beautifully in *Darkness at Noon* by Arthur Koestler (1941): "The ultimate truth is penultimately always a falsehood." The next-to-last "truth" is always invalidated when the final truth is understood or discovered.

At this point in our history we have not achieved the state of nirvana associated with knowing everything that can be known about how little children develop and how we can help them in the process. That which is acceptable--and even mandated--in quality educare programs today may be found to be less than adequate as the knowledge base grows. The field will suffer from creeping sterility if established criteria for acceptability become

gate-keepers that preclude the testing of new ideas and new approaches.

3. Establishing comfortable and effective linkages with other human service fields. As already suggested, the field of early intervention grew up essentially between the cracks of other human service fields. Social service actually gave birth to the day care component of the field and nurtured it in its infancy. Although this nurture kept the field alive, it also branded it as a service for pathological families--an image which has been difficult to overcome. Even so, early intervention programs need social services in order to meet the diverse needs of families in today's world. The role of social service in our history needs to be acknowledged and the necessity for including this component in our contemporary programs needs to be recognized.

And certainly the linkage between early intervention and many branches of psychology needs to be strengthened-- perhaps especially Divisions 7 (Developmental), 12 (Clinical), and 37 (Child, Youth, and Family Services). Just these professional areas have holistic orientations, so must early intervention programs. In order to be effective, an educare program must deal with the total family situation, and there is a great need to find ways to bring psychological services into early intervention settings. No resistance would be offered by personnel in early childhood programs, as they recognize the need and want help.

But there are other linkages that need to be strengthened. Early childhood has always had a comfortable linkage with pediatrics, but this becomes increasingly important as we bring

more and more children into contact with one another from earlier and earlier ages. A major challenge facing the child care director every day is the maintenance of sanitary conditions. Early childhood programs have not been without their frightening episodes and the threat of epidemics--influenza, hepatitis, diarrhea, alleged or admitted sexual abuse, and possibly other unpublicized crises. And, of course, the spectre of AIDS stalks the field today. As balancing services with costs is always crucial if a service is to be utilized, a major challenge for the educare field is to find ways to improve health surveillance and maintenance without unduly increasing costs.

Perhaps the biggest organizational challenge for early intervention programs is to find a way to establish comfortable linkages with elementary education programs. During this decade it has been demonstrated that some of the academic gains associated with creative early childhood programs become attenuated during the early elementary years unless continuing support is provided (Caldwell, 1986; 1987). Some of this attenuation is undoubtedly due to the fact that smooth continuity from programs such as Head Start into public school, with mutual exchanges of information, rarely occurs. Rather the transition is saltatory, not continuous as is development, with sudden exposure of the child to different teaching styles and strategies and objectives.

Educational continuity is a two-way process; it goes downward as well as upward. Today many schools are gearing up to offer education for four-year-olds, a preparation lamented by some

leaders in early education. And the type of child care service showing the most rapid expansion is infant/toddler care. One might think that early childhood professionals would rejoice at this evidence of greater public acceptance of the worth of their services, but this is not always the case. Rather, many leaders in the field are intensely--and perhaps justifiably--apprehensive about what will happen to young children if control of early childhood programs is assigned to state departments of education. Will, as many fear, the first grade be pushed without modification down to the kindergarten and kindergarten be pushed down to the four's? Will babies be enrolled in formal gym classes? Will parents be kept away? Will the kind of pushing that Elkind (1981, 1987) has eloquently lamented become the order of the day?

These questions clamor for answers. But the answers will not be found in denunciatory polemics; they will be forthcoming only as different program models are designed and tested. My colleagues and I developed a comprehensive educare program for children aged six months to twelve years at Kramer School in Little Rock, Arkansas (Elardo & Caldwell, 1974). Vertical continuity, as well as horizontally linked services, were built-in features of the model. One could not tell where "education" stopped and "day care" began. Parental enthusiasm for Kramer's continuity model as a *service*--regardless of the academic effects it might achieve--was unbelievable.

In spite of its appeal, the Kramer model in its entirety was never exported to other schools in Little Rock (though many aspects of the program were incorporated into other local schools), much less nation-wide. It is when large-scale adoption

of a program model is tried that rigidities associated with over-bureaucratization occur and intensify fears of developmentally inappropriate programs. Avoiding that rigidity, while still fostering the continuity needed for optimal developmental progress and administrative harmony is the big challenge.

Other needed linkages will be mentioned only briefly. Certainly leaders in business and industry need to be aware of the contribution of quality educare to the economy as well as to the well-being of workers. This is on its way. And politicians who used to rebut requests for fiscal support of child care with inane comments such as, "Why, it's just baby sitting, isn't it?" now send their constituents statements from the **Congressional Record** to prove how supportive they are on this issue. But, as every child advocate knows, there is still a need for more awareness on the part of political leaders of the importance of early childhood programs. In the future, all professional groups will undoubtedly devote more attention to their role in the conceptualization, implementation, and monitoring of early childhood programs as the level of public consciousness rises about the importance of the field to children and families. Such efforts will help to inform policy makers and help to strengthen the political will to take action.

4. **Setting a broader research agenda.** The upsurge of early childhood research during the past two decades has been very exciting. However, much of it has dealt with a narrow range of topics--the effects of early child care on attachment, cognitive

gains or losses associated with family-based or group-based care, health risks associated with group experience, etc. In other ways, the research has not been without its problems. Often the studies have had inadequate methodology. Control groups, if used at all, have often been casual and inappropriate aggregations of children of reasonably comparable age! For example, in one study done a number of years ago which purported to evaluate the effects of infant day care on social behavior during the preschool years (Schwarz, Strickland, & Krolick, 1974), the researchers included in their "home reared" sample several children who had been in family day care and one who was in a foster home--hardly a "pure" contrast group. But, more significantly, such a design demonstrates the assumption of a total dichotomy between groups--i.e., one group is "home reared" while the other is not.

Another problem is that much of our research has lacked ecological validity (Bronfenbrenner, 1979); procedures have often been carried out in laboratory settings that bear little resemblance to real-life situations. A good example of this can be found in research concerned with day care and attachment--one of the areas of hottest debate (Belsky, 1986; Phillips, McCartney, & Howes, 1987). Many of the studies in this genre have used the Strange Situation test of Ainsworth and Wittig (1969). This is generally carried out in a forbidding laboratory situation and is often quite anxiety-provoking for young children. Some of the studies using this paradigm (Blehar, 1974; Belsky, 1986) have suggested that children who enter day care at an early age may show either anxious or avoidant attachment to

their mothers.

Research using a more ecologically relevant procedure, such as that of Blanchard and Main (1979), has not led to the same conclusions. These investigators assessed separation and reunion reactions of young children when they were being left and picked up in their regular child care centers rather than in a strange laboratory. In this setting, ambivalent and anxious attachment were not common. Much more of such "real-life" research is necessary if we are to be able to answer the truly pressing questions about the effects of early alternate care.

In addition to these methodological problems, much of our research has been concerned with **products** or **outcomes** rather than with **processes**. We still know too little about what actually takes place in early childhood programs of contrasting quality. Furthermore, the existing research has dealt with only one main variable--day care versus no day care--without considering the interactions between and among home variables, intrinsic child variables, and day care variables. A new study only recently funded by the National Institute of Child Health and Human Development will deal with the effects of day care considered via a more appropriate paradigm which allows all these variables to co-vary and will then assess the effects of multiple existing patterns on the development of young children. This study, which will be conducted simultaneously in ten sites, represents a big step forward in research on early intervention.

5. **Developing a policy orientation.** Most social scientists, regardless of whether they wanted to, have been forced to mature

to the point of understanding that there has to be a symbiotic relationship between the development of the knowledge base and its implementation. When I was a student I think I saw the process of the dissemination of ideas roughly as follows: a researcher does a good piece of research; the study is published in a respectable journal and is accessible to the remainder of the scientific community; he or she perhaps becomes "famous" within the profession. Can one truly have been that naive? Certainly at the time I had never heard of a scientist's calling a press conference to discuss the results of his or her study, of going on television (possibly to debate someone who might question the findings), of writing his or her representative in Congress to arrange for the publication of the results in the *Congressional Record* and possibly scheduling an appearance before an important congressional committee, or hiring a consultant to help plan the marketing strategy before the report is even written! But, as we all well know, those things happen in today's world.

Perhaps because of this new style our findings less frequently merely gather dust on library shelves. However, the modern way appears to have produced an epidemic of foot-in-mouth disease when it comes to disseminating our findings (ideas, predilections, etc.) in public. An invitation to appear on national television seems somehow to confer more scientific status these days than acceptance of an article in the *Psychological Review*. And, being human, we get carried away with our own importance and perhaps overstate our case just a bit. When we promise too much, we set up ourselves (and the ideas we

represent) for more vehement future censure and attack. Over-sell invariably leads to over-kill if the product cannot live up to the hype.

The continuing public debate about the value of programs such as Head Start is a good example of policy-oblivious research decisions and public statements of results. When early research (Cicirelli, 1969) began to be interpreted as "showing no long-term gains for Head Start children," evaluators countered that imperfect designs and inadequate tests had been used. Although such arguments have merit, post hoc reasoning is always just a little bit weak. If design experts consider a chosen research strategy inadequate for an investigation, they should indicate this at the outset. Likewise, if we feel that our tests are inappropriate for a planned evaluation, we should not use them. Rather we should simply say that we do not have adequate tools for evaluating the effects of a certain intervention. Claiming that our disappointing results are due to the fact that we used the wrong tests is roughly the logical equivalent of claiming that, though we did not find statistically significant differences, the differences we found were in the expected direction!

Research with implications for policy decisions about early intervention programs must be done well, must be done conservatively and cautiously, and must be done with an interior image of the bank of microphones into which we shall have to dump our findings. Although it may sound cliched to make this claim, policy decisions about young children are critical for our

future. We must not allow ourselves--whether in quest of safe tenure or a quick academic promotion or whatever--to conduct research that is flimsily conceptualized, carelessly executed, indifferently analyzed, and policy-blind.

6. Being receptive to ideas from other countries. We have much to learn from what is taking place in the rest of the world in the area of early intervention. Undoubtedly the greatest, most enriching experiences I have had since I redefined myself as an early child development specialist have been associated with international travel and study. What is happening in America in terms of enthusiasm and support for early intervention is present all over the world. We are part of a global early childhood movement in which the accepted patterns of care and rearing of children are changing.

Many of you may have seen the book edited by William Kessen, *Childhood in China* (1975), which our delegation of a dozen or so professionals, mainly psychologists, wrote after our trip there in 1973. China-watching was not as popular then as it is now, but you can be sure that our eyes were opened in amazement and awe at what we saw. Whatever different members of the group thought about how they were educating and caring for young children (the Chinese made no separation at all between education and care), we were all overwhelmed that they had made such a commitment to educate their young children. And they seemed to have no conflict about whether this was primarily a service for children to foster their development, a service for the parents to enable them to work, or a service for the nation so that it could benefit from the availability of women for the work force

and a better educated future citizenry. Clearly it served all these purposes.

Some of the participants in the events in Tienanman Square in May, 1989 were in those kindergartens we visited in 1973. With fantastic media coverage, those young adults showed the world that, if they are given the opportunity to learn to think, they are eventually going to think for themselves. This realization was, for me, one of the most encouraging aspects of the demonstrations.

In South Africa, a country not usually known as progressive, one finds many dedicated whites working for the expansion of early childhood programs for young blacks. This is done with the conviction that the children need these experiences now in order to be ready for education and job opportunities when apartheid goes. And the programs are good, good according to anybody's criteria. They call their programs educare, incidentally.

In Singapore, one finds child care with a heavy emphasis on academics, dedicated to the principle that every child in the country must become bilingual and not suffer from kiasu (to be left out). In spite of this apparent pushiness, both the staff and children wear T-shirts imprinted with the slogan, "We Really Care."

To complete this brief world tour I will refer to a more western nation--France. In March of 1989 I spent two weeks there as a member of a delegation sent by the French-American Foundation to see what America could learn from the French early childhood system. The first thing that should be said is that

they really have a system--something we still cannot boast in this country. Almost 100% of children in the 3 to 6 year range attend state-supported schools. If there is any national attitude of worry that this "weakens" family influence, we could not detect it. The schools are called Ecole Maternelle, incidentally, perhaps offering enough reassurance that they will provide maternal-like care that parents experience little or no anxiety in enrolling their children in them.

One of the impressive things in the French system is their solution to the auspice problem--the first issue identified in this paper. Programs for children younger than three years are under the Ministry of Health; those for children older than three years are operated by the Ministry of Education. The flexibility of those 3-6 programs is fascinating. They officially operate only from 8:30 a.m. to 11:30 a.m. and then again from 1:30 p.m. to 4:30 p.m, thus providing little help to parents needing full day care. However, if the families need the extended coverage, the Ecole offers "wrap-around" care. The child may come to school earlier, may eat lunch at school, and then may remain after school until 6:30! The "regular" hours are free, and parents pay on a sliding scale for the lunches and extra hours. Funding is shared among the departments (states), the municipalities, and the parents.

These are but brief examples of what America can learn from other countries about how to design, operate, and finance early intervention programs. We have come a long way in this country, but we still have a long way to go.

Summary

Early intervention programs are very much with us these years. We find them in our universities, our churches, our big factories and unions, our poverty programs, our neighborhoods. Intellectual leadership for the field has come largely from some of psychology's "greats" of the last quarter century, but workers in the vineyards have come largely from other disciplines, other orientations. Hopefully that will change in the years ahead.

Fascinating changes in patterns of social living have occurred during this time frame. Young adults, regardless of what might have been modeled or urged as life patterns, have subtly altered their implicit plans about how to rear children. Such plans now involve sharing the task with professionals--along with the expectation that, if this is done, the end result will somehow be improved. This presents an exciting challenge to professional psychologists to offer their services and thereby influence favorably the future growth of the field.

Footnote

¹Based on an Invited Address to Division 37 (Child, Youth, and Family Services) of the American Psychological Association, New Orleans, Louisiana, August 12, 1989.

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